HOUSE BILL No. 1007

DIGEST OF HB 1007 (Updated January 16, 2019 5:52 pm - DI 133)

Citations Affected: IC 16-35; IC 25-1.

Synopsis: Perinatal care. Requires the state department of health (department) to establish a perinatal navigator program. Requires a health care provider to: (1) use a validated and evidence based verbal screening tool to assess a substance use disorder in pregnancy for all pregnant women who are seen by the health care provider; and (2) if the health care provider identifies a pregnant woman who has a substance use disorder and is not currently receiving treatment, provide treatment or refer the patient to treatment. Requires the department to establish guidelines for health care providers treating substance use disorder in pregnancy. Adds the department of child services to the list of agencies to which a health care provider may not release the results of certain tests given to a pregnant woman.

Effective: July 1, 2019.

Kirchhofer, McNamara, Sullivan, Shackleford

January 7, 2019, read first time and referred to Committee on Public Health.
January 17, 2019, reported — Do Pass.
HOUSE BILL No. 1007

A BILL FOR AN ACT to amend the Indiana Code concerning health.

Be it enacted by the General Assembly of the State of Indiana:

SECTION 1. IC 16-35-1-11 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 11. The state department shall establish a perinatal navigator program for the purposes of engaging pregnant women in early prenatal care and providing referrals to pregnant women for wraparound services and home visiting programs in the local community.

SECTION 2. IC 16-35-11 IS ADDED TO THE INDIANA CODE AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Chapter 11. Assessment of Substance Use Disorder in Pregnancy

Sec. 1. Nothing in this chapter may be construed to authorize violation of the confidentiality requirements of any state or federal law.

Sec. 2. This chapter applies only to health care providers who provide maternity health care services.
Sec. 3. Each health care provider shall use a validated and evidence based verbal screening tool to assess a substance use disorder in pregnancy for all pregnant women who are seen by the health care provider:
(1) as early as possible at the onset of prenatal care; and
(2) throughout the pregnancy, including during the first, second, and third trimester.

Sec. 4. (a) The state department shall establish guidelines for health care providers treating substance use disorder in pregnancy. When developing the guidelines, the state department shall consult with the Indiana perinatal quality improvement collaborative.
(b) The state department shall make the guidelines established under subsection (a) available on the state department's Internet web site.

Sec. 5. If, after using the screening tool under section 3(1) of this chapter, a health care provider identifies a pregnant woman who has a substance use disorder and is not currently receiving treatment, the health care provider shall:
(1) provide treatment to the patient; or
(2) refer the patient to treatment.

SECTION 3. IC 25-1-9-22, AS AMENDED BY P.L.129-2018, SECTION 24, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 22. (a) This section applies to:
(1) a physician licensed under IC 25-22.5;
(2) a physician assistant licensed under IC 25-27.5;
(3) a certified direct entry midwife licensed under IC 25-23.4; and
(4) an advanced practice registered nurse licensed under IC 25-23;
who provides prenatal care within the scope of the provider's license.
(b) Unless ordered by a court, an individual described in subsection (a) may not release to a law enforcement agency (as defined in IC 35-47-15-2) or the department of child services (established by IC 31-25-1-1) the results of:
(1) a verbal screening or questioning concerning drug or alcohol use;
(2) a urine test; or
(3) a blood test;
provided to a pregnant woman without the pregnant woman's consent.
COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred House Bill 1007, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill do pass.

(Reference is to HB 1007 as introduced.)

KIRCHHOFER

Committee Vote: Yeas 13, Nays 0